

## Form CPF 18A: Report of Independent Expenditure MANCE Promoting Election or Defeat of Candidate(s)

## Office of Campaign and Political Finance

Commonwealth of Massachusutts							
Office of Campaign and Political One Ashburton Place Boston, MA 02108 (617) 727-8352.	Finance		e en				
1. Date of Report:	November 6, 2006						
I. Date of Leap or or	(Must be filed within 7 business days of expenditu	(Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate)					
2. Expenditure(s) Mad	le By: Massachusetts Nurses Assoc (Name of individual or group making ex	penditure)	· · · · · · · · · · · · · · · · · · ·				
	340 Turnpike St.,	Canton	02021				
	Street Address	City/Town	Zip				
3. Name of Candidate	(s) For Whom the Above Expenditure(s) Election of	r Defeat Promoted:	Rep.				
0.00	_ LINAN CAMPIACI	10000	1 04				
		· .	**				
4. Expenditure(s):	4		:				
			5.				

Date Paid	To Whom Paid	Address	Purpose	Amount
11/4/06	Saltus Press	24 Jolma Rd.	Mailing	132,90
11/4/00	Dartus iless	Worc. 01604		
		1, 1		90.6
11/3/06	Saltus Press	24 Jolma Rd.	Mailing	10.0
		Worc. 01604		
				24.99
11/4/06	Stones Phones	121 S. Palm Canyon	Auto Dials	10

Palm Springs CA 92262

I hereby certify the expenditures noted are independent expenditures, as defined by M.G.L. c.55, section 18A:

(1) the individual(s) or group who made the expenditure(s) described herein did not solicit or receive any contributions in contemplation of such expenditure(s); and

(2) the individual(s) or group who made the expenditure(s) described herein did not cooperate, consult or act in concert with or at the request or suggestion of any candidate, or political committee organized on behalf of any candidate, or any agent of a candidate or any political committee in making such expenditure(s).

I further certify that all statements made herein are true and accurate.

Signed	l under the	penal	ties of perjury:			,
V.		$\bigwedge$	1100100	. 11	1	AL

Signature

Date

Katrina Anderson

Director, Legislation and Government Affairs

Print Name of Individual Signer and Title (if signing on behalf of a group)